



National Institute on Drug Abuse (NIDA) **Arizona Opioid Summary**

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Arizona Opioid Summary

Opioid-Involved Overdose Deaths

Since 2013, opioid-involved deaths rose 76 percent in Arizona, with 928 deaths reported in 2017. This is a rate¹ of 13.5 deaths per 100,000 persons, compared to the average national rate of 14.6 deaths per 100,000 persons. The greatest increase occured among deaths involving synthetic opioids other than methadone (mainly fentanyl) with a sevenfold increase from 36 deaths in 2012 to 267 deaths in 2017 (Figure 1). Heroin-involved overdose deaths also increased during the same 5-year period from 101 to 334 deaths. Prescription opioid-involved deaths also contributed to the overall increase with 414 deaths reported in 2017.

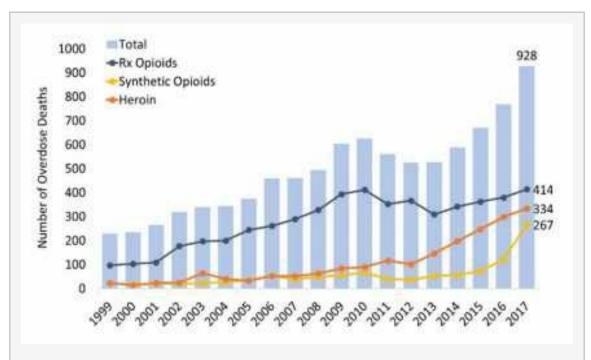


Figure 1. Number of overdose deaths involving opioids in Arizona, by opioid category. Drug categories presented are not mutually exclusive, and deaths might have involved more than one substance. Source: CDC WONDER.

Opioid Pain Reliever Prescriptions

In 2017, Arizona providers wrote 61.2 opioid prescriptions for every 100 persons (Figure 2) compared to the average U.S. rate of 58.7 prescriptions (CDC). This represents a 30 percent decline from a peak of 88.5 opioid prescriptions per 100 persons in 2010.

The rate of overdose deaths involving opioid prescriptions has shown a steady, long-term increase to 5.9 deaths per 100,000 persons in 2017, however, there has been no significant change over the last decade (Figure 2).

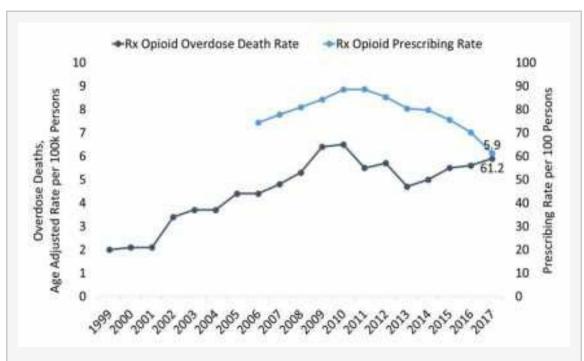


Figure 2. Arizona rate of overdose deaths involving prescription opioids and the opioid prescribing rate. Source: CDC and CDC WONDER.

Neonatal Abstinence Syndrome (NAS)

NAS or neonatal opioid withdrawal syndrome (NOWS) may occur when a pregnant woman uses drugs such as opioids during pregnancy. A recent national study revealed a fivefold increase in the incidence of NAS/NOWS between 2004 and 2014, from 1.5 cases per 1,000 hospital births to 8.0 cases per 1,000 hospital births. This is the equivalent of one baby born with symptoms of NAS/NOWS every 15 minutes in the United States. During the same period, hospital costs for NAS/NOWS births increased from \$91 million to \$563 million, after adjusting for

inflation (Figure 3).

To date, there is no standard in NAS/NOWS provider and hospital coding practices (CDC). As a result, there is variability in the trends and rates reported by states. In Arizona, the rate of NAS/NOWS increased by fivefold from 1.5 cases per 1,000 hospital births in 2008 to 7.3 cases per 1,000 hospital births in 2016 (Arizona Department of Health Services).

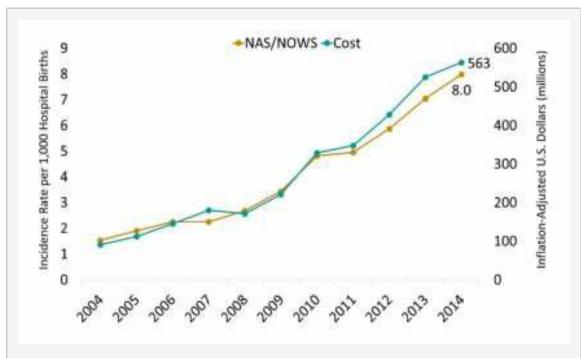


Figure 3. NAS/NOWS Incidence rate and hospital costs for treatment in the United States. Source: T.N.A. Winkelman, et al., 2018.

HIV Prevalence and HIV Diagnoses Attributed to Injection Drug Use (IDU)

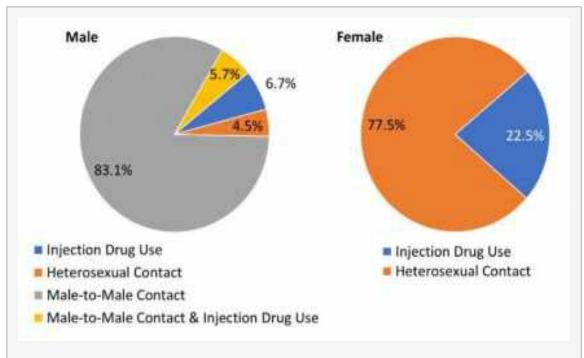


Figure 4. Arizona: Estimated percent of male vs. female with new HIV diagnoses, by transmission category, 2016. Source: CDC and www.AIDSVU.org.

- U.S. Incidence: In 2016, 9 percent (3,480) of the 39,589 new diagnoses of HIV in the United States were attributed to IDU. Among males, 6.3 percent (2,530) of new cases were transmitted via IDU or male-to-male contact and IDU. Among females, 2.3 percent (950) were transmitted via IDU (CDC).
- **U.S. Prevalence:** In 2016, 991,447 Americans were living with a diagnosed HIV infection—a rate of 306.6 cases per 100,000 persons. Among males, 19.9 percent (150,4661) contracted HIV from IDU or male-to-male contact and IDU while 21 percent (50,154) of females were living with HIV attributed to IDU (CDC).
- State Incidence: Of the new HIV cases in 2016, 778 occurred in Arizona. Among males, 12.4 percent of new HIV cases were attributed to male-to-male contact and IDU. Among females, 22.5 percent of new HIV cases were attributed to IDU (Figure 4) (AIDSVu).
- **State Prevalence:** In 2015, an estimated 15,261 persons were living with a diagnosed HIV infection in Arizona—a rate of 270 cases per 100,000 persons. Of those, 18.6 percent of male cases were attributed to IDU or male-to-male contact and IDU. Among females,

Hepatitis C (HCV) Prevalence and HCV Diagnoses Attributed to Injection Drug Use²

- U.S. Incidence: In 2016, there were an estimated 41,200 new cases of acute HCV³ (CDC). Among case reports that contain information about IDU, 68.6 percent indicated use of injection drugs (CDC).
- **U.S. Prevalence**: An estimated 2.4 million Americans are living with HCV based on 2013-2016 annual averages (CDC).
- **State Incidence**: This data is unavailable for the state of Arizona (CDC).
- **State Prevalence**: In Arizona, there are an estimated 62,400 persons living with Hepatitis C (2013-2016 annual average), a rate of 1,230 cases per 100,000 persons (HepVu).

Additional Resources

- Arizona Department of Health Services, Opioid Epidemic
- Centers for Disease Control and Prevention, Opioid Overdose



FY2018 NIH-funded projects related to opioid use and use disorder in Arizona: 2

VIEW RESULTS

Find treatment in Arizona (SAMHSA)

Notes

- 1. Rates are age adjusted using the 2000 U.S. standard population. See CDC WONDER at https://wonder.cdc.gov/ for methods.
- 2. Not all states collect or report data on the incidence or prevalence of Hepatitis C or on how Hepatitis C is transmitted. When available, the data will be included.
- 3. Actual acute cases are estimated to be 13.9 times the number of reported cases in any year.